PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10725140

CLAIMS AS FILED - PART I									<u>~</u> /^	<u> </u>		
 		·	(Column 1)		(Column 2)			TYPE		OR		R THAN ENTITY
TOTAL CLAIMS .			7					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			7 minus 20=		* 70			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		0			X43=		OR	· X86=	
М	JLTIPLE DEPE	NDENT CLAIM F	RESÈNT					+145=		OR	+290=	
* 1	f the differenc	e in column 1 is	less than z	ero, enter	"0" in	column 2	į	TOTAL		OR	TOTAL	
	CLAIMS AS AMENDED - PART II									_	OTHER	THAN
	·	(Column 1)		(Colum	nn 2)	(Column 3)	Column 3) SMAL		ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	<u>i.</u>	OR	X\$18=	
AM	Independent	* ENTATION OF MI	Minus	PENDENT	ĊL AIM	=		X43=		OR	X86=	
	1		Jein ee Je	LINDLINI	CLAIN			+145=	· · ·	OR	+290=	
						·	L	TOTAL		OR	TOTAL	
		(Column 1)		(Cal	- 0\	· · · · · · · · · · · · · · · · · · ·	Α	DDIT. FEE			ADDIT. FEE	
		CLAIMS	Ī .	(Colum		(Column 3)	· -			, ,	·	
IT B		REMAINING AFTER		NUMB PREVIO		PRESENT EXTRA		RATE	ADDI- TIONAL	1 1	RATE	ADDI- TIONAL
AMENDMENT B		AMENDMENT		PAID F		CATTA	L		FEE]]		FEE
	Total	*	Minus	**	-	=	L	X\$ 9=		OR	X\$18=	
AM	Independent	*	Minus	***		=		X43=	•	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.145			.000	
								+145= TOTAL		OR	+290=	•
										OR A	TOTAL DDIT. FEE	
		(Column 1)		(Columi		(Column 3)	,					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON I	Total	*	Minus	drik .		<u>:</u>		X\$ 9=	, 22	OR	X\$18=	
ME I	Independent		Minus	***		=	- 7	X43=				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	A43=		OR	X86=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL DDIT. FEE	
T	tile Highest Num	mber Previously Paid ber Previously Paid	o For IN THIS For (Total or	SPACE is I	ess than I) is the I	3, enter "3." highest number			opriate box			